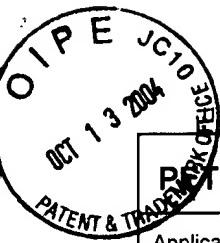


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**PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)**

 Docket Number (Optional)  
**HALB:020**
Application Number **09/929,465**Filed **August 14, 2001**
 For **Blends of Esters with Isomerized Olefins and Other Hydrocarbons as Base Oils for Invert Emulsion Oil Muds**
Art Unit **1712**Examiner **TUCKER, PHILIP C.**

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$110	\$55	\$ <u>      </u> 0
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$430	\$215	\$ <u>      </u> 0
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$980	\$490	\$ <u>      </u> 980
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1530	\$765	\$ <u>      </u> 0
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2080	\$1040	\$ <u>      </u> 0

- Applicant claims small entity status. See 37 CFR 1.27.
- A check in the amount of the fee is enclosed.
- Payment by credit card. Form PTO-2038 is attached. IF INSUFFICIENT FUNDS IN DEPOSIT ACCT.
- The Director has already been authorized to charge fees in this application to a Deposit Account.
- The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-0807. I have enclosed a duplicate copy of this sheet.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

I am the

- applicant/inventor
- assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).
- attorney or agent of record. Registration Number 50-0807
- attorney or agent under 37 CFR 1.34.  
Registration number if acting under 37 CFR \_\_\_\_\_.

10/18/2004 RFEKADU1 00000056 09929465

01 FC:1253

980.00 OP

Signature

October 12, 2004

Date

Karen B. Tripp

Typed or printed name

713 658 9323

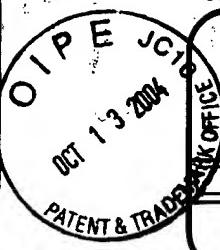
Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of \_\_\_\_\_ forms are submitted.

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the needs of the individual case. Any comments or the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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# FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)  
**\$980.00***Complete if Known*

Application Number	<b>09/929,465</b>
Filing Date	<b>August 14, 2001</b>
First Named Inventor	<b>Jeff Kirsner</b>
Examiner Name	<b>TUCKER, PHILIP C.</b>
Art Unit	<b>1712</b>
Attorney Docket No.	<b>HALB:020</b>

**METHOD OF PAYMENT (check all that apply)**

Check  Credit card  Money Order  Other  None

 Deposit Account:

Deposit Account Number  
**50-0807**

Deposit Account Name  
**Karen B. Tripp, Attorney at Law**

The Director is authorized to: (check all that apply)

 Charge fee(s) indicated below  Credit any overpayments Charge any additional fee(s) or any underpayment of fee(s) Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Description	
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non - English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 430	2252 215	Extension for reply within second month	
1253 980	2253 490	Extension for reply within third month	
1254 1,530	2254 765	Extension for reply within fourth month	
1255 2,080	2255 1,040	Extension for reply within fifth month	
1401 340	2401 170	Notice of Appeal	
1402 340	2402 170	Filing a brief in support of an appeal	
1403 300	2403 150	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,370	2453 685	Petition to revive - unintentional	
1501 1,370	2501 685	Utility issue fee (or reissue)	
1502 490	2502 245	Design issue fee	
1503 660	2503 330	Plant issue fee	
Total Claims -20** = 0 X 0.00			
Independent Claims - 3** = 0 X 0.00			
Multiple Dependent			
Fee Description			
Fee Code (\$)	Fee Code (\$)	Fee Description	
1202 18	2202 9	Claims in excess of 20	
1201 88	2201 44	Independent claims in excess of 3	
1203 300	2203 150	Multiple dependent claim, if not paid	
1204 88	2204 44	** Reissue independent claims over original patent	
1205 18	2205 9	** Reissue claims in excess of 20, and over original patent	
SUBTOTAL (1) (\$)			
Fee from below			
Extra Claims			
Total Claims -20** = 0 X 0.00			
Independent Claims - 3** = 0 X 0.00			
Multiple Dependent			
Fee Description			
Fee Code (\$)	Fee Code (\$)	Fee Description	
1807 50	1807 50	Processing fee under 37 CFR § 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Statement	
1801 790	2809 395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810 790	2810 395	For each additional invention to be examined (37 CFR § 1.129(b))	
1802 900	1802 900	Request for Continued Examination (RCE)	
Other fee (specify)			
SUBTOTAL (2) (\$)			
*Reduced by Basic Filing Fee Paid			
SUBTOTAL (3) (\$)			<b>\$980.00</b>

\*or number previously paid, if greater; For Reissues, see above

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

**\$980.00****SUBMITTED BY***Complete (if applicable)*

Name (Print/Type)	<b>Karen B. Tripp</b>	Registration No. (Attorney/Agent)	<b>30,452</b>	Telephone	<b>713 658 9323</b>
Signature	<i>Karen B. Tripp</i>			Date	<b>October 12, 2004</b>

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.